## **Independent Citizens Redistricting Commission**

Application Review and Quality Control Sheet

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Applicant Name:	David	Rice			
Date Received: No f	me Stamp	Applicant Number:	10024		
Recommended Applicant Pool Status:		Final Applicant	Pool Status:		
Included	Removed	✓Included	$\square$ Removed		
REQUIREMENTS:					
1. Was the application re	Yes No				
If NO, list time/da	te application was re	eceived:			
2. Is the application com	□ves □ No				
If NO, list the item(s) that need to be completed:					
3. Indicate how the applicant responded to the following questions:					
A. Student enrolled in a college/university in the City of Austin?			□Yes □No		
If YES, consider I a	nd ii only; If NO, con	sider I, ii, iii, and iv:			
i. Reside in	the City of Austin?		ŬYes □No		
ii. Registered	I to vote in the City	of Austin?	☐Yes ☐No		
iii. <b>Continuo</b> u	sly registered to vo	te in the City of Austin?	□Yes □No		
iv. Voted in 3	of the last 5 City of	Austin general elections?	☑Yes ☐No		
❖ Follow-up needed relationships	ited to REQUIREME	NTS?	□Yes □No		
	e(s) addressed and a	····			

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<u>CC</u>	ONFLICTS OF INTEREST:		
4.	Did the applicant respond "Yes" to any conflict of interest of interest of the second	questions?	□Yes □No
*	Follow-up needed related to CONFLICTS OF INTEREST?  If YES, identify issue(s) addressed and disposition:		□Yes □No
<u>CC</u>	DNSISTENCY:		
5.	Are applicant answers consistent?  If NO, indicate which answer(s):		∐Yes □No
<b>.</b>	Follow-up needed related to CONSISTENCY?  If YES, identify issue(s) addressed and disposition:		□Yes □No
A	pplication Reviewed By:	Review Date:	2/6/13
	ollow-up Contact(s) Reviewed By:	QC Review Date:	listis
, <i>"</i>	Show-up Contact(s) neviewed by.	_ Dute	